

ACTIVITY EVALUATION FORM FOR CALIFORNIA MCLE

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Date of Offering: September 9, 2009

McCormick & Schmick's - 206 N. Rodeo Drive
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Name of Participant (optional) _____
First
Last

Directions: On a scale of 1-5 (5 being the highest, best or most and 1 being the least, lowest or worst) rate by circling the number reflecting your opinion.

<i>To what extent were your personal objectives satisfied?</i>	5 4 3 2 1
Comments: _____	
<i>To what extent did the environment contribute to the learning experience?</i>	5 4 3 2 1
Comments: _____	
<i>To what extent did the written material contribute to the learning experience?</i>	5 4 3 2 1
Comments: _____	
<i>To what extent were the objectives stated in the promotional literature or those stated at the beginning of the activity satisfied?</i>	5 4 3 2 1
Comments: _____	
<i>To what extent did the activity contain significant current intellectual or practical content?</i>	5 4 3 2 1
Comments: _____	

	<i>Overall Teaching Effectiveness</i>	<i>Effectiveness of Teaching Method</i>	<i>Significant Current Intellectual or Practical Content</i>
Instructor's Name: Robert Rotstein	5 4 3 2 1	5 4 3 2 1	5 4 3 2 1
Subject/Topic _____			
Comments: _____			
Instructor's Name:	5 4 3 2 1	5 4 3 2 1	5 4 3 2 1
Subject/Topic _____			
Comments: _____			